

To: Lieutenant Governor McNally, Speaker Sexton  
From: Alli Williamson, TennCare Legislative Liaison  
Date: March 1, 2021  
**Subject: PC 483 Quarterly Update**

Pursuant to PC 483, TennCare would like to provide an update on Neonatal Abstinence Syndrome (NAS) initiatives, as well as an update on Medical Loss Ratio (MLR) as it relates to NAS and opioid use.

In response to PC747, TennCare, the Department of Health, and the Department of Mental Health and Substance Abuse Services, collaborated to develop educational materials for providers and facilities that prescribe medication assisted treatment (MAT). The materials developed include information about risks and effects of neonatal abstinence syndrome (NAS) and information about approaches to client-centered counseling. The materials have been distributed by the three state agencies and TennCare's managed care organizations (MCOs). The materials can be found on TennCare's Opioid Strategy website:

<https://www.tn.gov/content/dam/tn/tenncare/documents/NASEducationMaterialForMATProviders.pdf>.

Additionally, TennCare has shown a continued decrease in the incidence of NAS births. Updated data shows that the rate of NAS births per 1,000 live births decreased from 24.0 in 2018 to 20.0 in 2019 – equating to about a 16.7 percent decrease over the year period. The graph below highlights the trend in the NAS rate for TennCare members. Please note that the complete 2019 report will be available in Quarter 3 of 2021. To reference the complete TennCare NAS report for CY2018, please visit the following link:

<https://www.tn.gov/content/dam/tn/tenncare/documents/TennCareNASData2018.pdf>. The Tennessee Department of Health's NAS Surveillance Summary for November 2020 can be found here:

[https://www.tn.gov/content/dam/tn/health/documents/nas/NASSummary\\_Week\\_4720.pdf](https://www.tn.gov/content/dam/tn/health/documents/nas/NASSummary_Week_4720.pdf)

TennCare is continuing to prioritize initiatives that aim to improve the health of women and infants in 2020, especially for those impacted by opioid and substance use disorder. For example:

- TennCare continues to partner with Vanderbilt University Medical Center (VUMC) to implement the Maternal Opioid Misuse (MOM) Model Grant. Tennessee was one of 10 states to be awarded the MOM Model Grant earlier this year, which is a \$5.3 million-dollar federal grant funded through the Centers of Medicare and Medicaid Services (CMS) to support mothers and infants impacted by the opioid epidemic. The grant is in partnership with VUMC and aims to provide more services and resources to aid women with opioid use disorder and children with NAS or opioid exposure.
- TennCare is also continuing to partner with sister agencies including the Department of Health and the Department of Mental Health and Substance Abuse Services. For example, all three agencies are engaged in a Learning Collaborative organized by the Association of State and Territorial Health Officials (ASTHO) to help improve addiction treatment and prevention for pregnant women and their infants.
- TennCare's Managed Care Organizations (MCOs) continue to engage women of childbearing age and pregnant women who may be at risk for chronic opioid use. Through the development and implementation of a predictive risk stratification analytic algorithm, the MCO population health programs are making great strides in effectively identifying clinical risk associated with opioid misuse and abuse and in response outreach and engaging high risk members. The MCOs continue to outreach and engage with thousands of women of childbearing age in the TennCare program.

- TennCare and its MCOs are also continuing to work diligently to expand access to high quality medication assisted treatment (MAT) through the Buprenorphine Enhanced Supportive Medication-Assisted Recovery and Treatment (BESMART) Network. TennCare's MCOs and Pharmacy Benefits Manager are committed to providing increased support and resources to broaden access for TennCare members with opioid use disorder seeking addiction and recovery services. The network officially launched on January 1, 2019 and there are currently over 260 newly contracted, high-quality MAT providers that have partnered with at least one of TennCare's three MCOs. This provider group includes OBGYNs that are trained in delivering MAT to this high-risk population. In July 2020, legislation passed by the Tennessee General Assembly (PC 771 and PC 761) authorized Nurse Practitioners and Physician Assistants with a Drug Addiction Treatment Act of 2000 (DATA 2000) waiver to prescribe buprenorphine products, one medication used in MAT. TennCare has worked with the three MCOs to provide guidance around the implementation of this legislation, with a focus on ensuring high quality care for members across Tennessee.

TennCare has also continued to support the implementation of a statewide quality improvement initiative in conjunction with the Tennessee Initiative for Perinatal Quality Control (TIPQC) to increase access to voluntary long-acting reversible contraceptives (LARCs) (e.g. intrauterine devices) immediately after delivery.

Finally, TennCare is providing an update on MLR as it relates to NAS and opioid use. Below are MCO-level total MLRs and "opioid" MLRs. As outlined in the act, this data is "associated with neonatal abstinence syndrome and the use of opioids by women of childbearing age enrolled in the TennCare program." This data set is for October 2019 – September 2020.

	<u>NAS/Opioids MLR</u>	<u>Total MLR</u>
Amerigroup	333%	89.63%
BlueCare	396%	89.62%
United	387%	86.15%

As always, the Division of TennCare hopes you find this information useful, and please let us know if you have questions with this report or any previous reports.